Statement

Details regarding shortage of Doctors and Pharmacists

Sector-12, R.K. Puram

Dispensary/ Unit	Doctors			Pharmacists		
	Sanctioned	Filled	Vacant	Sanctioned	Filled	Vacant
Ayurvedic	3	1	2	3	2	1
Homoeopathic	3	2	1	3	1	2
Siddha	1	1	Nil	1	Nil	1

National Commission on Population

1348. SHRI C. RAMACHANDRAIAH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether first meeting of the reconstituted National Commission on Population has been held;

(b) if so, what decisions were taken in this meeting;

(c) whether Government are planning to come out with a specific policy for demographically weak States; and

(d) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Yes, Sir. The first meeting of the reconstituted National Commission on Population was held under the chairmanship of hon'ble Prime Minister on 23rd July 2005. The following two major decisions were taken in the meeting.

(i) Conduct of an Annual Health Survey of all districts which could be published annually so that health indicators at district level are periodically published, monitored and compared against benchmarks.

(ii) Setting up of five groups of experts for studying the population profile of the States of Bihar, Uttar Pradesh, Rajasthan, Madhya Pradesh and Orissa to identify weaknesses in the health delivery system and to suggest measures that would be taken to improve the health and demographic status of the States.

(c) and (d) In accordance with the vision of the National Common Minimum Programme, a National Rural Health Mission (NRHM) has been launched on 12th April 2005. The Mission will be implemented throughout the country, with special focus on 18 States *viz.* Jammu & Kashmir, Himachal Pradesh, Uttar Pradesh, Madhya Pradesh, Bihar, Rajasthan$_t$ Orissa, Uttaranchal, Chhattisgarh, Jharkhand, Arunachal Pradesh, Assam, Manipur, Meghalaya, Mizoram, Nagaland, Sikkim and Tripura. The Mission aims at provision of comprehensive and integrated primary healthcare to the people, especially to the rural poor, women and children. The approach of the Government is to improve availability of integrated primary healthcare services to the people as also to improve healthcare seeking behaviour of people for the range of maternal and child healthcare services that would logically lead to adoption of better contraceptive practices. The Strategies under the NRHM for demographically weak States are as follows:—

(i) Creation of around 2.5 lakh trained village level "Accredited Social Health Activists (ASHA)" within a period of 4 years.

(ii) Creation of Village Health Teams and preparation of Village Health Plan.

(iii) Strengthening Sub-Centres with united funds.

(iv) Improvement of 2000+CHCs, measured through Indian Public Health Standards (IPHS).

(v) Creation of District Health Plan and District Health Fund.

(vi) Mainstreaming AYUSH.

(vii) Integrating vertical Health and Family Welfare Programme under the NRHM at National, State and District Levels.

(viii) Strengthening Programme Management capacities at National, State and District Levels.

(ix) Promotion of multiple Health Insurance models.

(x) Promotion of partnership with private sector for achieving public Health goals.

(xi) Involvement of Panchayati Raj Institutions and the Community.

HUBS of spurious drugs

1349 SHRI B.J. PANDA:
SHRI RAVI SHANKAR PRASAD:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the Bhagirath Palace in Delhi followed by Aligarh in Uttar Pradesh and Alwar in Rajasthan are the hubs of spurious drugs' trade, worth crores of rupees;

(b) whether Government have ever raided these markets to assess the impact of this illegal trade;

(c) if so, the details thereof;

(d) whether Government have developed some inherent foolproof measures to control the ramification of this menace in the country; and

(e) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) As per feed back available from Drugs Control Department of Govt, of NCT, Delhi, Drugs Control Department, Govt, of U.P. and Drugs Controller, Rajasthan, the perception that Bhagirath Palace in Delhi, Aligarh in U.P. and Alwar in Rajasthan are the hubs of spurious drugs trade worth crores of rupees, is not based on fact. From the data available from different States it was observed that the samples of drugs declared spurious during last 3 years is in between 0.3% to 0.4% of the total samples tested.Thus, it cannot be said that the places under reference are main distribution centers for spurious drugs.

(b) and (c) As per information available from the Health & FW Deptt. of Govt, of NCT of Delhi, the officers of the Drugs Control Department of